2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 264970

Entity Name: HULL & COMPANY, INC.

FILED Jan 02, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2150 S. ANDREWS AVENUE FT. LAUDERDALE, FL 33316 **Current Mailing Address: New Mailing Address:** 2150 S. ANDREWS AVENUE FT. LAUDERDALE, FL 33316 FEI Number: 59-0994263 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HULL, RICHARD F 2150 S. ANDREWS AVENUE FORT LAUDERDALE, FL 33316 The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition CALABRESE, EDWIN, Name: Name: 2150 S ANDREWS AVE Address: Address: City-St-Zip: FT LAUDERDALE, FL 00000, City-St-Zip: Title: Title: () Delete () Change () Addition Name: RIORDAN, MICHAEL J Name: 2150 S. ANDREWS AVE Address: Address: FT. LAUDERDALE, FL City-St-Zip: City-St-Zip: Title: Title: PD () Delete () Change () Addition HULL, RICHARD F, Name: Name: 2150 S ANDREWS AVE Address: Address: FT LAUDERDALE, FL 00000, City-St-Zip: City-St-Zip: Title: SEVP () Delete Title: () Change () Addition CALABRESE, EDWIN J Name: Name: Address: 2150 S. ANDREWS AVE. Address: City-St-Zip: FT LAUDERDALE, FL 00000, City-St-Zip: Title: Title: () Delete () Change () Addition SIMONS, WILLIAM N Name: Name: 2150 S ANREWS AVENUE Address: Address: City-St-Zip: FT LAUDERDALE, FL City-St-Zip: Title: () Delete Title: () Change () Addition BOWERS, BRUCE E Name: Name: 2150 S. ANDREWS AVE Address: Address: City-St-Zip: City-St-Zip: FT. LAUDERDALE, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM N. SIMONS ST 01/02/2003